PTO/SB/05 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

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## UTILITY PATENT APPLICATION

Daniel E. H. AFAR First Inventor

Attorney Docket No.

SERPENTINE TRANSMEMBRANE ANTIGENS

511582001611

TRANSMITTAL		Title	EXPRESSED IN HUMAN CANCERS AND USES				
(Only for new nonprovisional applications under 37	CFR 1.53(b))		THEREOF				
		Expres	ss Mail Label No. EL 984098394 US				
APPLICATION ELEMEI See MPEP chapter 600 concerning utility patent		tents.	MS Patent Application  Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450				
(preferred arrangement set forth below)  - Descriptive title of the invention  - Cross Reference to Related Applications  - Statement Regarding Fed sponsored R &  - Reference to sequence listing, a table, or a computer program listing appendix  - Background of the Invention  - Brief Summary of the Invention  - Brief Description of the Drawings (if filed)  - Detailed Description  - Claim(s)  - Abstract of the Disclosure  4.     Drawing(s) (35 U.S.C. 113)   Total	Pages 66  D Sheets 26  SFR 1.63(d))  completed)  in inventor(s)	<b>6</b> 1	Alexandria, VA 22313-1450  7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s))  10. 37 CFR 3.73(b) Statement (when there is an assignee) Attorney  11. English Translation Document (if applicable)  12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations  13. X Preliminary Amendment  14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  15. (Certified Copy of Priority Document(s) (if foreign priority is claimed)  16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i) Applicant must attach form PTO/SB/35 or its equivalent.				
6. X Application Data Sheet. See 37 CFR 1.	76		17. X Other: Petition to Make Special				
specification following the title, or in an Application  Continuation  Z Divisional  Prior application information: Examiner  For CONTINUATION OR DIVISIONAL APPS of under Box 5b, is considered a part of the disclose	Continuation- Gary The entire sure of the accor	under 37 -in-part (0 / Nicko disclosu mpanyin	CIP) of prior application No.: 10/011,095				
	19. COR	RESPO	ONDENCE ADDRESS				
X Customer Number:	25225		OR Correspondence address below				
Name							
Address							
City State		'e	Zip Code				
Country	Tele	phone	Fax				
Name (Print/Type) Pavid L. Deve	rnoe		Registration No. (Attorney/Agent) 50,128				
Signature			Date December 31, 2003				

I hereby certify that this correspondence in an envelope addressed to: MS Patent			
date shown below.  Dated:/2/3//0 7	Signature: Judy	Budgwate,	(Judy Bridgwater)

PTO/SB/17 (10-03)
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EEE TOANGMITTAL			Complete if Known						
FEE TRANSMITTAL		Application Number			er	Not Yet Assigned			
for FY 2004		Filing Date				Concurrently Herewith			
		First Named Inventor			itor	Daniel E. H. AFAR			
Effective 10/01/2003, Patent fees are subject to annual revision.		Examiner Name				Not Yet Assigned			
X Applicant claims small entity status. See 37 CFR 1.27		Art Unit			Not Yet Assigned				
TOTAL AMOUNT OF PAYMENT (\$) 515.00		Attorney Docket No. 511582001611			01611				
METHOD OF PAYMENT (check all that apply)				FEE	CALCUL	ATION (co	ntinued)		
Chark Credit Money Cthor None	FEE CALCULATION (continued)  3. ADDITIONAL FEES								
Card Order Other	J. 7	יוועטיי		LLO					
X Deposit Account:	Lara	. Entitu	Cmall	Entitu					
Deposit O3-1952 referencing	Fee	e Entity Fee	Fee	Entity	-	5 D			
Number 511582001611	Code	(\$)	Code	(\$)		Fee Desc	enpuon	Fee Paid	
Deposit Account Morrison & Foerster LLP	1051	130	2051	65	Surcharge -	- late filing fe	e or oath		
Name The Director is authorized to: (check all that apply)	1052	50	2052	25		- late provisi	onal filing fee or cover		
	4050	400	4050	400	sheet.				
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English	n specificatio	n		
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	-		parte reexamination		
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Requesting Examiner a		of SIR prior to		
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting Examiner a	publication of	of SIR after		
FEE CALCULATION	1251	110	2251	55		or reply withi	n first month		
1. BASIC FILING FEE	1252	420	2252	210	Extension for	or reply withi	n second month		
Large Entity Small Entity	1253	950	2253	475	Extension f	or reply within	n third month		
Fee Fee Fee Fee Fee Fee Description Fee Paid  Code (\$) Code (\$)	1254	1,480	2254	740	Extension f	or reply withi	n fourth month		
1001 770 2001 385 Utility filing fee 385.00	1255	2,010	2255	1,005	Extension f	or reply withi	n fifth month		
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of A	opeal			
1003 530 2003 265 Plant filing fee	1402	330	2402	165	-	f in support o			
1004 770   2004 385   Reissue filing fee	1403 1451	290 1,510	2403 1451	145	•	oral hearing		$\vdash$	
	1452	110	2452	55			olic use proceeding	$\vdash$	
SUBTOTAL (1) (\$) 385.00		1,330	2453	665		etition to revive – unavoidable			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue	sue fee (or reissue)			
Extra Fee from Claims below Fee Paid	1502	480	2502	240	Design issu	e fee			
Total Claims 10 -20** =   x   = 0.00	1503	640	2503	320	Plant issue	fee			
Independent 1 -3** = x = 0.00	1460	130	1460	130	Petitions to	the Commis	sioner	130.00	
Multiple Dependent =	1807	50	1807	50	Processing	fee under 37	7 CFR 1.17(q)		
Large Entity   Small Entity	1806	180	1806	180	Submission	of Information	on Disclosure Stmt		
Fee Fee Fee Fee Code (\$) Code (\$)	8021	40	8021	40			essignment per		
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	Filing a sub	mission after	of properties) r final rejection		
1201 86 2201 43 Independent claims in excess of 3					(37 CFR 1.	129(a)) Iditional inve	ntion to be	<b></b>	
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	examined (	37CFR 1.129	9(b))		
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385			Examination (RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	of a design	expedited e application	xamination		
and over original patent	Other	Other fee (specify)							
SUBTOTAL (2) (\$) 0.00 *Reduced by Basic Filing F				ling Fee	Paid	SUBTO	TAL (3) (\$)	130.00	
**or number previously paid, if greater, For Reissues, see above									
SUBMITTED BY	Donie i	ratio - M					(if applicable))		
Name (Print/Type) David L. Devernoe		ration No ey/Agent)		,128		Telephone	(858) 720-7943		
Signature						Date	December 31, 2	2003	

Application No. (i	known):	Attorney Docket No.: 51158200161
Cer	tificate of Express Maili	ng Under 37 CFR 1.10
I hereb Expres	y certify that this correspondence is being de s Mail, Airbill No. EL 984098394 US in an en	posited with the United States Postal Service as relope addressed to:
	MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
on	December 31, 2003  Date	
<u>-</u>	Signature  Judy Bridgwate  Typed or printed name of person	
Note:	Each paper must have its own certificate of each submitted paper.  Application Data Sheet	mailing, or this certificate must identify

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